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UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA, SAN FRANCISCO DIVISION

In re

PG&E Corporation,

and

PACIFIC GAS AND ELECTRIC
COMPANY,

Debtors.

☐ Affects PG&E Corporation
☐ Affects Pacific Gas and Electric Company
☒ Affects both Debtors

*All papers shall be filed in the Lead Case,
No. 19-30088-DM,

Case No. 19-30088-DM

Chapter 11

Lead Case, Jointly Administered

**EXHIBIT LIST IN SUPPORT OF
MOTION PURSUANT TO FED. R.
BANKR. P. 9006(b)(1) TO ENLARGE THE
TIME FOR BROOKE M. HAWES TO
FILE PROOF OF CLAIM**

Date: July 7, 2020

Time: 10:00 a.m.

Crtrm.: Courtroom 17

450 Golden Gate Avenue
San Francisco, CA 94102

Judge: Hon. Dennis Montali

Objection deadline: July 2, 2020
4:00 p.m. (Pacific Time)

<u>Exhibit</u>	<u>Description Of Exhibit</u>	<u>Page No</u>
Exhibit 1 to Motion	Proof of Claim	3

DOWNEY BRAND LLP

DATED: June 5, 2020

By: /s/ Jamie P. Dreher
JAMIE P. DREHER
Attorneys for Brooke M. Hawes

DOWNEY BRAND LLP

EXHIBIT 1

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA (SAN FRANCISCO DIVISION)

In re:
PG&E CORPORATION,
- and -
PACIFIC GAS AND ELECTRIC
COMPANY,
Debtors.

Bankruptcy Case
No. 19-30088 (DM)

Chapter 11
(Lead Case)
(Jointly Administered)

Proof of Claim (Fire Claim Related)

Read the instructions before filing this claim form. This form is for tort claimants who have a claim against the Debtors (i.e. PG&E Corporation and Pacific Gas and Electric Company) that arose prior to the Debtors filing for bankruptcy (i.e. prior to January 29, 2019) and that arose from, or relates to, a fire.

Do not use this form for non-fire claims. Non-fire tort claimants should use Form 410.

Do NOT file a fraudulent claim. A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Please type or print in the spaces below. Do NOT use red ink or pencil.

Part 1: Identify the Claim

1. Who is the current creditor?	Brooke M. Hawes Name of the current creditor (the person or entity to be paid for this claim)	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Are you filing this claim on behalf of your family? A family is a group of two or more people related by birth, marriage, domestic partnership, or adoption and residing together. All such people are considered as members of one family.	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If you checked "Yes", please provide the full name of each family member that you are filing on behalf of: _____ _____ _____ _____	
4. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? Name <u>Reiner, Slaughter & Frankel</u> Attorney Name (if applicable) <u>Russell Reiner</u> Attorney Bar Number (if applicable) <u>84461</u> Street Address <u>2851 Park Marina Dr, Suite 200</u> City <u>Redding</u> State <u>CA</u> Zip Code <u>96001</u> Phone Number <u>530-2411905</u> Email Address <u>rreiner@reinerslaughter.com</u>	Where should payments to the creditor be sent? (if different) Name <u>Eric Ratinoff Law Corp Client Trust Account</u> Attorney Name (if applicable) <u>Eric J. Ratinoff</u> Attorney Bar Number (if applicable) <u>166204</u> Street Address <u>401 Watt Avenue</u> City <u>Sacramento</u> State <u>CA</u> Zip Code <u>95864</u> Phone Number <u>916-970-9100</u> Email Address <u>nziegler@ericratinoff.com</u>
5. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
6. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

Part 2:**Give Information About the Claim as of the Date this Claim Form is Filed****7. What fire is the basis of your claim?**

Check all that apply.

- ☒ Camp Fire (2018)
☐ North Bay Fires (2017)
☐ Ghost Ship Fire (2016)
☐ Butte Fire (2015)
☐ Other (please provide date and brief description of fire: _____)

8. What are the loss location(s) where you and/or your family suffered harm? (e.g. home or business address, place of injury, place from which you were evacuated, if different.)

Location(s): 14792 Wildlife Dr, Magalia, CA 95954

9. How were you and/or your family harmed?

Check all that apply

- ☒ Property Damage (homes, structures, personal property, land, trees, landscaping, and all other property damage)
☒ Owner ☐ Renter ☒ Occupant ☐ Other (Please specify): _____
☒ Personal Injury
☐ Wrongful Death (if checked, please provide the name of the deceased) _____
☐ Business Loss/Interruption
☐ Lost wages and earning capacity
☒ Loss of community and essential services
☐ Agricultural loss
☒ Other (Please specify): **Mental & Emotional Anguish**

10. What damages are you and/or your family claiming/seeking?

Check all that apply

- ☒ Economic damages (including replacement cost of damaged property, diminution in value, loss of use, lost inventory, lost profits, and other economic damage)
☒ Non-economic damages (including loss of society and support, loss of consortium, pain and suffering, emotional distress, annoyance and discomfort, and other non-economic damage)
☒ Punitive, exemplary, and statutory damages
☒ Attorney's fees and litigation costs
☒ Interest
☒ Any and all other damages recoverable under California law
☐ Other (Please specify): _____

11. How much is the claim?

- ☐ \$ _____ (optional)
☒ Unknown / To be determined at a later date

Part 3: Sign Below

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.
18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☐ I am the creditor.
☒ I am the creditor's attorney or authorized agent.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 06/02/2020 (mm/dd/yyyy)

/s/Russell Reiner

Signature

Print the name of the person who is completing and signing this claim:

Name	<u>Russell</u>	<u>Reiner</u>
	First name	Middle name Last name
Title	<u>Lawyer</u>	
Company	<u>Reiner, Slaughter & Frankel</u>	
	Identify the corporate servicer as the company if the authorized agent is a servicer.	
Address	<u>2851 Park Marina Dr, Suite 200</u>	
	Number	Street
	<u>Redding</u>	<u>CA</u> <u>96001</u>
	City	State ZIP Code
Contact phone	<u>530-241-1905</u>	Email <u>rreiner@reinerslaughter.com</u>

370609179109



Delivered
Wednesday 6/03/2020 at 9:51 am



DELIVERED

Signed for by J RODRIGUEZ



GET STATUS UPDATES
OBTAIN PROOF OF DELIVERY

FROM

REINER SLAUGHTER & FRANKEL
Russell Reiner
2831 Park Marina Drive
Suite 200
Basking CA 95002
925 241-1915

TO

EGLE Corporation Cattle Processing
PO BOX 415
Upham Glen LLC
EPOKUSA 7405 0212
530 241-1915

Travel History

Shipment Facts

Returns